



TFW
Docket No. 5595.210

3763

SKADDEN, ARPS, SLATE, MEAGHER & FLOM
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Date: September 19, 2006

Applicant(s) : Lav et al.
Serial No. : 09/870,392 Examiner: Williams, Catherine Serke
Filed : May 30, 2001 Art Unit: 3763
Title : A Medical Apparatus For Use By A Patient For Medical
Self Treatment of Diabetes

AMENDMENT TRANSMITTAL
AND REQUEST FOR EXTENSION OF TIME

Mail Stop AMENDMENT
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I hereby certify that this paper is being deposited with the United States Postal Service, as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1415, Alexandria, VA 22313-1450, on September 19, 2006.

Robert B. Smith

Reg. No. 28,538

Robert B. Smith

Signature

September 19, 2006
Date

Transmitted herewith is an AMENDMENT in the above-identified application.

1. () No additional fee is required.

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2. ☐ The fee has been calculated as shown below:

<u>Claims remaining</u>	<u>Prior Paid Claims</u>	<u>Extra</u>	<u>Rate</u>	<u>Fee</u>
Total:	minus (at least 20) =	@	\$18	= \$
Independent	minus (at least 3) =	@	\$88	= \$
TOTAL ADDITIONAL FEE: \$ 0				

3. ☒ An extension of time to respond to the PTO Communication dated March 24, 2006 is hereby requested. The required fee is indicated below:

Within first month:	<input type="checkbox"/>	\$120
Within second month	<input type="checkbox"/>	\$450
Within third month	<input checked="" type="checkbox"/>	\$1,020
Within fourth month	<input type="checkbox"/>	\$1,590

4. ☐ The Amendment includes an Information Disclosure Statement. Enclosed is Form PTO-1449 and copies of ____ reference(s).
5. ☒ The Commissioner is hereby authorized to charge the amount of \$ 1,020.00 representing (a) additional claims fee (\$); (b) the extension fee (\$ 1,020); and (c) the fee for filing an Information Disclosure Statement (\$) to deposit account No. 19-2385. A copy of this sheet is enclosed for such purpose.
6. ☒ In the event that an extension of time is required and applicant has inadvertently overlooked the need to request a petition and file the fee, the applicant hereby petitions for such extension of time. The Commissioner is authorized to charge the required fee to deposit account No. 19-2385. A copy of this sheet is enclosed for such purpose.
7. ☒ The Commissioner is hereby authorized to charge payment of any additional fees required in connection with this application, and credit any overpayment, to deposit account No. 19-2385. A copy of this sheet is enclosed.

Skadden, Arps, Slate, Meagher & Flom

By Robert B. Smith

Robert B. Smith

Registration No. 28,538

Attorneys for Applicant(s)

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